

**NONPROVISIONAL PATENT APPLICATION**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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Attorney Docket No.: 116146

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**MAIL STOP PATENT APPLICATION**

**Customer Number: 27074**

**NONPROVISIONAL APPLICATION TRANSMITTAL  
RULE §1.53(b)**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



Sir:

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title): SYSTEMS AND METHODS FOR CHARACTERIZING THE  
COVERAGE OF AD HOC SENSOR NETWORKS

By (Inventors): Juan LIU, Xenofon KOUTSOUKOS

- ☒ ☒ Formal drawings ☐ Informal drawings (Figs. 1-11; 8 sheets) are attached.  
☒ Use Figure 7 for front page of Publication.  
☒ A Declaration and Power of Attorney is filed herewith.  
☐ This application claims benefit of Provisional Application No. \_\_\_\_\_ filed \_\_\_\_\_.  
(A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.)  
☒ This patent application is assigned to PARC Inc.  
☒ The executed Assignment is filed herewith.  
☒ An Information Disclosure Statement is filed herewith.  
☐ A Preliminary Amendment is filed herewith.  
☐ This application is NOT to be published under 35 U.S.C. 122(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication of applications 18 months after filing.

☒ The filing fee is calculated below:

CLAIMS IN THE APPLICATION AFTER ENTRY OF  
ANY PRELIMINARY AMENDMENT NOTED ABOVE

FOR:	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE				\$ 770
TOTAL CLAIMS	10 - 20	= 0*	x 18	\$
INDEP CLAIMS	3 - 3	= 0*	x 86	\$
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED			+290	\$
* If the difference is less than zero, enter "0".			TOTAL	\$ 770

- ☒ Please charge Deposit Account No. 24-0037 in the amount of \$770.00. Two duplicate copies of this sheet are enclosed.
- ☒ The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 24-0037. Two duplicate copies of this sheet are attached.

Respectfully submitted,



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